

Missouri Oil and Gas Council

Form OGC-3

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

 APPLICATION TO DRILL ☒ DEEPEN ☐ PLUG BACK ☐
 for an oil well ☒ or gas well ☐

 NAME OF COMPANY OR OPERATOR Town Oil Co. DATE 9-11-97
16205 W. 287th St. Paola Kansas 66071
 Address City State

DESCRIPTION OF WELL AND LEASE			
Name of lease PAYNE	Well number # 4	Elevation (ground) 960	
WELL LOCATION (give footage from section lines) _____ ft from (N) (S) sec. line _____ ft from (E) (W) sec. line (SEE MAP)			
WELL LOCATION Section <u>5</u> Township <u>43N</u> Range <u>33</u>		County CASS	
Nearest distance from proposed location to property or lease line <u>165</u> feet		Distance from proposed location to nearest drilling, completed or applied for well on the same lease <u>250</u> feet	
Proposed depth 300	Drilling contractor, name & address Town Oil Co.	Rotary or Cable Tools Rotary	Approx. date work will start 9-12-97
Number of acres in lease 30		Number of wells on lease, including this well, completed in or drilling to this reservoir: <u>1</u> Number of abandoned wells on lease: <u>0</u>	
If lease, purchased with one or more wells drilled, from whom purchased Name <u>N/A</u> Address _____		No. of Wells: producing _____ Injection _____ Inactive _____ abandoned _____	
Status of Bond Single Well <input type="checkbox"/> Amt. _____ Blanket Bond <input checked="" type="checkbox"/> Amt. <u>20,000</u> <input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> ATTACHED			
Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed N/A			
Proposed casing program		Approved casing -- To be filled in by State Geologist	
amt. <u>20</u>	size <u>6 3/4</u>	wt / ft <u>14#</u>	cem. <u>3</u>
<u>300</u>	<u>2 7/8</u>	<u>6.5#</u>	<u>40</u>
amt. <u>20'</u>	size <u>6 1/4"</u>	wt / ft <u>14#</u>	cem. <u>3</u>
<u>300'</u>	<u>2 7/8"</u>	<u>6.5#</u>	<u>40</u>
I, the undersigned, state that I am the _____ of the _____ (company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete in the best of my knowledge. Signature <u>Lucy Town</u>			

Permit Number 20642Approval Date 9/11/97Approved By Jane H. Williams

Note: This Permit not transferable to any other person or to any other location.

Remit two copies to: Missouri Oil and Gas Council
P.O. Box 280 Rolla, Mo. 65401

One will be returned for driller's signature

☒ Driller's log required☒ E-logs required if run☒ Core analysis required if run☒ Drill stem test info. required if run☐ Samples required☒ Samples not requiredWATER SAMPLES REQUIRED @

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.